

1 Alan Steven Wolf
2 THE WOLF FIRM, A Law Corporation
3 2955 Main Street, Second Floor
4 Irvine, CA 92614
5 Telephone: (949) 720-9200
6 Fax: (949) 608-0128

7 Creditor, THE WOLF FIRM, A Law Corporation

8 UNITED STATES BANKRUPTCY COURT
9 SOUTHERN DISTRICT OF NEW YORK

10 In re:
11 RESIDENTIAL CAPITAL, LLC, aka
12 RESIDENTIAL CAPITAL
13 CORPORATION,
14 Debtor and
15 Debtor-in-Possession.

CASE NO: 12-12020

CHAPTER: 11

**RESPONSE BY CREDITOR THE WOLF
FIRM, A LAW CORPORATION TO
DEBTOR'S NOTICE OF HEARING AND
MOTION ON SIXTEENTH OMNIBUS
OBJECTION TO CLAIMS; DECLARATION
OF ALAN STEVEN WOLF IN SUPPORT
THEREOF**

Hearing:

Date: August 21, 2013
Time: 10:00 a.m.
Courtroom: 501

23 Creditor The Wolf Firm, A Law Corporation ("Creditor") respectfully submits the
24 following response to Debtor's Notice of Hearing and Motion on Sixteenth Omnibus
25 Objection to Claims filed on July 3, 2013 as Docket No. 4150 as follows:

26 Pursuant to the Order Establishing Deadline for Filing Proofs of Claims and
27 Approving the Form and Manner of Notice Thereof entered August 29, 2012, Creditor
28

1 timely submitted on November 9, 2012 its unsecured claim in the amount of
2 \$273,944.83, Claim No. 3896 ("Claim"). As instructed, the Claim was submitted to the
3 Claims and Noticing Agent: Kurtzman Carson Consultants, LLC ("Claims Agent"). A
4 true and correct copy of the Claim stamped November 9, 2012 and issued Claim No.
5 3896 by the Claims Agent is attached hereto as Exhibit "1" and is incorporated herein by
6 reference.

7 Creditor submitted only one (1) Claim to the Claims Agent in this case (Claim No.
8 3896). Creditor properly and timely submitted Claim no. 3896 on November 9, 2012
9 and intended that the Claim be a wholly unsecured Claim. Although Creditor
10 inadvertently completed section 4, its completion of that section also shows that the
11 claim is wholly unsecured in the full Claim amount of \$273,944.83. As such, Creditor
12 hereby requests that Claim No. 3896 not be expunged as requested by the Debtor and
13 instead be considered the unsecured Claim of Creditor.

14 Claim No. 5875 was not submitted by Creditor. Creditor has just received from
15 the Claims Agent, a copy of purported Claim 5875 and it is the exact same document
16 that was received by the Claims Agent on November 9, 2012 and designated Claim No.
17 3896. It is interesting to note, that this exact same document is construed by the
18 Claims Agent as an unsecured claim under Claim 5875 while it is construed as secured
19 claim under Claim 3896. Furthermore, Claims Agent shows Claim 5875 as filed on
20 November 21, 2012 which is beyond the extended bar deadline to file claims.
21 Accordingly, expunging Claim No. 3896 and retaining purported Claim 5875 may result
22 in Creditor's timely filed Claim being construed as filed untimely. In short, Claim 3896
23 was intended to be an unsecured claim and it was timely filed and should be not be
24 expunged.

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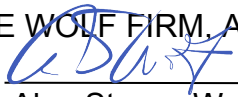
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1 **WHEREFORE**, Creditor hereby requests that the Court allow Claim no.
2 3896 in its entirety in the unsecured amount of \$273,944.83.

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4 Dated: July 26, 2013

Respectfully submitted,

5 THE WOLF FIRM, A Law Corporation

6 By: _____
7 Alan Steven Wolf, President of Creditor,
8 THE WOLF FIRM, A Law Corporation
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DECLARATION OF ALAN STEVEN WOLF

I, Alan Steven Wolf declare as follows:

1. I am an adult resident of Orange County, California and I am President of The Wolf Firm, A Law Corporation, Creditor ("Creditor") in the above-entitled action. I am licensed to practice before all Courts in the State of California. I make this declaration in support of Creditor's Response to Debtor's Motion on Sixteenth Omnibus Objection to Claims filed herein. I have personal knowledge of the facts and matters set forth herein, and if called upon to testify thereto, I could and would do so competently.

2. On November 9, 2012, unsecured claim in the amount of \$273,944.83, Claim No. 3896 ("Claim") for The Wolf Firm, A Law Corporation was filed. As instructed, by the Order Establishing Deadline for Filing Proofs of Claims and Approving the Form and Manner of Notice Thereof entered August 29, 2012, Creditor timely submitted on the Claim and submitted its Claim to the Claims and Noticing Agent: Kurtzman Carson Consultants, LLC ("Claims Agent"). A true and correct copy of the Claim stamped received November 9, 2012 and issued Claim No. 3896 by the Claims Agent is attached hereto as Exhibit "1" and is incorporated herein by reference.

3. My office submitted only one (1) Claim to the Claims Agent in this case (Claim No. 3896). This was intended to be a wholly unsecured claim. Although Creditor inadvertently completed section 4, its completion of that section also shows that the claim is wholly unsecured in the full Claim amount of \$273,944.83.

4. Claim No. 5875 was not submitted by me or my office. I've caused my office to obtain a copy of that purported claim from the Claims Agent and a copy of that Claim 5875 is attached as Exhibit "2". This is not a new claim, it is the document

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1 submitted under Claim 3896. Evidently, the Claims Agent, somehow referenced this
2 document twice.

3 I declare under penalty of perjury under the laws of the United States of America,
4 that the foregoing is true and correct.

5 Executed this 26th day of July, 2013 in Orange, California.

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7 _____
8 Alan Steven Wolf, President of
9 The Wolf Firm, A Law Corporation
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Exhibit “1”

COPY
PROOF OF CLAIM

B 10 (Official Form 10) (12/11)

UNITED STATES BANKRUPTCY COURT Southern District of New York		<p>RECEIVED</p> <p>NOV 09 2012</p> <p>KURTZMAN CARSON CONSULTANTS</p> <p>COURT USE ONLY</p> <p><input type="checkbox"/> Check this box if this claim amends a previously filed claim.</p> <p>Court Claim Number: _____ (If known)</p> <p>Filed on: _____</p> <p><input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.</p>						
Name of Debtor: Residential Capital, LLC, aka Residential Capital Corporation	Case Number: 1:12-bk-12020							
NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.								
Name of Creditor (the person or other entity to whom the debtor owes money or property): THE WOLF FIRM, A LAW CORPORATION								
Name and address where notices should be sent: Alan Steven Wolf, The Wolf Firm, A Law Corporation 2955 Main Street, Second Floor Irvine, CA 92614								
Telephone number: (949) 720-9200 email: alan.wolf@wolffirm.com								
Name and address where payment should be sent (if different from above):								
Telephone number: email:								
<p>1. Amount of Claim as of Date Case Filed: \$ <u>273,944.83</u></p> <p>If all or part of the claim is secured, complete item 4.</p> <p>If all or part of the claim is entitled to priority, complete item 5.</p> <p><input type="checkbox"/> Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.</p>								
<p>2. Basis for Claim: <u>Legal Services Performed</u> (See instruction #2)</p>								
3. Last four digits of any number by which creditor identifies debtor:	3a. Debtor may have scheduled account as: (See instruction #3a)	3b. Uniform Claim Identifier (optional): (See instruction #3b)						
<p>4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.</p> <p>Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: n/a</p> <p>Value of Property: \$ _____</p> <p>Annual Interest Rate _____ % <input type="checkbox"/> Fixed or <input type="checkbox"/> Variable (when case was filed)</p>								
<p>Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: \$ <u>273,944.83</u></p> <p>Basis for perfection: <u>Agreements</u></p> <p>Amount of Secured Claim: \$ _____</p> <p>Amount Unsecured: \$ <u>273,944.83</u></p>								
<p>5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.</p> <table style="width: 100%;"> <tr> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B). </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> Wages, salaries, or commissions (up to \$11,725*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier – 11 U.S.C. § 507 (a)(4). </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5). </td> </tr> <tr> <td style="vertical-align: top;"> <input type="checkbox"/> Up to \$2,600* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507 (a)(7). </td> <td style="vertical-align: top;"> <input type="checkbox"/> Taxes or penalties owed to governmental units – 11 U.S.C. § 507 (a)(8). </td> <td style="vertical-align: top;"> <input type="checkbox"/> Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)(). </td> </tr> </table> <p style="text-align: right;">Amount entitled to priority: \$ _____</p>			<input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).	<input type="checkbox"/> Wages, salaries, or commissions (up to \$11,725*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier – 11 U.S.C. § 507 (a)(4).	<input type="checkbox"/> Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5).	<input type="checkbox"/> Up to \$2,600* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507 (a)(7).	<input type="checkbox"/> Taxes or penalties owed to governmental units – 11 U.S.C. § 507 (a)(8).	<input type="checkbox"/> Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)().
<input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).	<input type="checkbox"/> Wages, salaries, or commissions (up to \$11,725*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier – 11 U.S.C. § 507 (a)(4).	<input type="checkbox"/> Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5).						
<input type="checkbox"/> Up to \$2,600* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507 (a)(7).	<input type="checkbox"/> Taxes or penalties owed to governmental units – 11 U.S.C. § 507 (a)(8).	<input type="checkbox"/> Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)().						
<p>*Amounts are subject to adjustment on 4/1/13 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.</p>								
<p>6. Credits. The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #6)</p>								

Claim #: 3896
Initials: MMH

B 10 (Official Form 10) (12/11)

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7. Documents: Attached are **redacted** copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. If the claim is secured, box 4 has been completed, and **redacted** copies of documents providing evidence of perfection of a security interest are attached. (See instruction #7, and the definition of "redacted".)

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

RECEIVED

If the documents are not available, please explain:

NOV 9 2012

8. Signature: (See instruction #8)

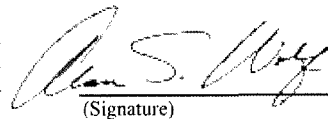
KURTZMAN CARSON CONSULTANTS

Check the appropriate box.

- ☒ I am the creditor. ☐ I am the creditor's authorized agent. ☐ I am the trustee, or the debtor, or their authorized agent. ☐ I am a guarantor, surety, indorser, or other codebtor. (Attach copy of power of attorney, if any.) (See Bankruptcy Rule 3004.) (See Bankruptcy Rule 3005.)

I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.

Print Name: Alan Steven Wolf, Esq.
Title: President/Managing Attorney
Company: THE WOLF FIRM, A LAW CORPORATION
Address and telephone number (if different from notice address above):
2955 Main Street, Second Floor
Irvine, CA 92614


(Signature)

11/8/2012
(Date)

Telephone number: (949) 720-9200 email: alan.wolf@wolffirm.com

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

INSTRUCTIONS FOR PROOF OF CLAIM FORM

The instructions and definitions below are general explanations of the law. In certain circumstances, such as bankruptcy cases not filed voluntarily by the debtor, exceptions to these general rules may apply.

Items to be completed in Proof of Claim form

Court, Name of Debtor, and Case Number:

Fill in the federal judicial district in which the bankruptcy case was filed (for example, Central District of California), the debtor's full name, and the case number. If the creditor received a notice of the case from the bankruptcy court, all of this information is at the top of the notice.

Creditor's Name and Address:

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

1. Amount of Claim as of Date Case Filed:

State the total amount owed to the creditor on the date of the bankruptcy filing. Follow the instructions concerning whether to complete items 4 and 5. Check the box if interest or other charges are included in the claim.

2. Basis for Claim:

State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card. If the claim is based on delivering health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information. You may be required to provide additional disclosure if an interested party objects to the claim.

3. Last Four Digits of Any Number by Which Creditor Identifies Debtor:

State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor.

3a. Debtor May Have Scheduled Account As:

Report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.

3b. Uniform Claim Identifier:

If you use a uniform claim identifier, you may report it here. A uniform claim identifier is an optional 24-character identifier that certain large creditors use to facilitate electronic payment in chapter 13 cases.

4. Secured Claim:

Check whether the claim is fully or partially secured. Skip this section if the claim is entirely unsecured. (See Definitions.) If the claim is secured, check the box for the nature and value of property that secures the claim, attach copies of lien documentation, and state, as of the date of the bankruptcy filing, the annual interest rate (and whether it is fixed or variable), and the amount past due on the claim.

5. Amount of Claim Entitled to Priority Under 11 U.S.C. § 507 (a).

If any portion of the claim falls into any category shown, check the appropriate box(es) and state the amount entitled to priority. (See Definitions.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority.

6. Credits:

An authorized signature on this proof of claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

7. Documents:

Attach redacted copies of any documents that show the debt exists and a lien secures the debt. You must also attach copies of documents that evidence perfection of any security interest. You may also attach a summary in addition to the documents themselves. FRBP 3001(c) and (d). If the claim is based on delivering health care goods or services, limit disclosing confidential health care information. Do not send original documents, as attachments may be destroyed after scanning.

8. Date and Signature:

The individual completing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what constitutes a signature. If you sign this form, you declare under penalty of perjury that the information provided is true and correct to the best of your knowledge, information, and reasonable belief. Your signature is also a certification that the claim meets the requirements of FRBP 9011(b). Whether the claim is filed electronically or in person, if your name is on the signature line, you are responsible for the declaration. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. If the claim is filed by an authorized agent, attach a complete copy of any power of attorney, and provide both the name of the individual filing the claim and the name of the agent. If the authorized agent is a servicer, identify the corporate servicer as the company. Criminal penalties apply for making a false statement on a proof of claim.

Exhibit “2”

B 10 (Official Form 10) (12/11)

UNITED STATES BANKRUPTCY COURT Southern District of New York		PROOF OF CLAIM
Name of Debtor: Residential Capital, LLC, aka Residential Capital Corporation	Case Number: 1:12-bk-12020	<div style="font-size: 24px; font-weight: bold; margin: 0;">RECEIVED</div> <div style="font-size: 24px; font-weight: bold; margin: 0;">NOV 21 2012</div> <div style="font-weight: bold; margin: 0;">KURTZMAN CARSON CONSULTANTS</div>
NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing. You may file a request for payment of an administrative expense according to 11 U.S.C. § 503.		
Name of Creditor (the person or other entity to whom the debtor owes money or property): THE WOLF FIRM, A LAW CORPORATION		
Name and address where notices should be sent: Alan Steven Wolf, The Wolf Firm, A Law Corporation 2955 Main Street, Second Floor Irvine, CA 92614		<input type="checkbox"/> Check this box if this claim amends a previously filed claim. Court Claim Number: _____ <i>(If known)</i> Filed on: _____
Telephone number: (949) 720-9200 email: alan.wolf@wolffirm.com		
Name and address where payment should be sent (if different from above):		<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to this claim. Attach copy of statement giving particulars.
Telephone number: email:		
1. Amount of Claim as of Date Case Filed: \$ <u>273,944.83</u> If all or part of the claim is secured, complete item 4. If all or part of the claim is entitled to priority, complete item 5. <input type="checkbox"/> Check this box if the claim includes interest or other charges in addition to the principal amount of the claim. Attach a statement that itemizes interest or charges.		
2. Basis for Claim: <u>Legal Services Performed</u> (See instruction #2)		
3. Last four digits of any number by which creditor identifies debtor:	3a. Debtor may have scheduled account as: _____ (See instruction #3a)	3b. Uniform Claim Identifier (optional): _____ (See instruction #3b)
4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a right of setoff, attach required redacted documents, and provide the requested information.		
Amount of arrearage and other charges, as of the time case was filed, included in secured claim, if any: <div style="text-align: right;">\$ <u>273,944.83</u></div>		
Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: n/a		Basis for perfection: <u>Agreements</u>
Value of Property: \$ _____		Amount of Secured Claim: \$ _____
Annual Interest Rate _____ % <input type="checkbox"/> Fixed or <input type="checkbox"/> Variable (when case was filed)		Amount Unsecured: \$ <u>273,944.83</u>
5. Amount of Claim Entitled to Priority under 11 U.S.C. § 507 (a). If any part of the claim falls into one of the following categories, check the box specifying the priority and state the amount.		
<input type="checkbox"/> Domestic support obligations under 11 U.S.C. § 507 (a)(1)(A) or (a)(1)(B).	<input type="checkbox"/> Wages, salaries, or commissions (up to \$11,725*) earned within 180 days before the case was filed or the debtor's business ceased, whichever is earlier – 11 U.S.C. § 507 (a)(4).	<input type="checkbox"/> Contributions to an employee benefit plan – 11 U.S.C. § 507 (a)(5).
<input type="checkbox"/> Up to \$2,600* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use – 11 U.S.C. § 507 (a)(7).	<input type="checkbox"/> Taxes or penalties owed to governmental units – 11 U.S.C. § 507 (a)(8).	<input type="checkbox"/> Other – Specify applicable paragraph of 11 U.S.C. § 507 (a)(____).
*Amounts are subject to adjustment on 4/1/13 and every 3 years thereafter with respect to cas		Amount entitled to priority: \$ _____
6. Credits. The amount of all payments on this claim has been credited for the purpose of n		



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7. Documents: Attached are **redacted** copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. If the claim is secured, box 4 has been completed, and **redacted** copies of documents providing evidence of perfection of a security interest are attached. (See instruction #7, and the definition of "redacted".)

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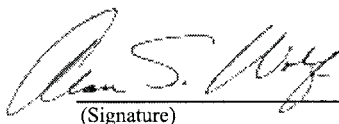
Check the appropriate box.

- ☒ I am the creditor. ☐ I am the creditor's authorized agent. ☐ I am the trustee, or the debtor, or their authorized agent. ☐ I am a guarantor, surety, indorser, or other codebtor. (See Bankruptcy Rule 3005.)
(Attach copy of power of attorney, if any.) (See Bankruptcy Rule 3004.)

KURTZMAN CARSON CONSULTANTS

I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief.

Print Name: Alan Steven Wolf, Esq.
Title: President/Managing Attorney
Company: THE WOLF FIRM, A LAW CORPORATION
Address and telephone number (if different from notice address above):
2955 Main Street, Second Floor
Irvine, CA 92614


(Signature)

11/8/2012
(Date)

Telephone number: (949) 720-9200 email: alan.wolf@wolffirm.com

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Creditor's Name and Address:

Fill in the name of the person or entity asserting a claim and the name and address of the person who should receive notices issued during the bankruptcy case. A separate space is provided for the payment address if it differs from the notice address. The creditor has a continuing obligation to keep the court informed of its current address. See Federal Rule of Bankruptcy Procedure (FRBP) 2002(g).

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State the type of debt or how it was incurred. Examples include goods sold, money loaned, services performed, personal injury/wrongful death, car loan, mortgage note, and credit card. If the claim is based on delivering health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information. You may be required to provide additional disclosure if an interested party objects to the claim.

3. Last Four Digits of Any Number by Which Creditor Identifies Debtor:

State only the last four digits of the debtor's account or other number used by the creditor to identify the debtor.

3a. Debtor May Have Scheduled Account As:

Report a change in the creditor's name, a transferred claim, or any other information that clarifies a difference between this proof of claim and the claim as scheduled by the debtor.

3b. Uniform Claim Identifier:

If you use a uniform claim identifier, you may report it here. A uniform claim identifier is an optional 24-character identifier that certain large creditors use to facilitate electronic payment in chapter 13 cases.

4. Secured Claim:

Check whether the claim is fully or partially secured. Skip this section if the claim is entirely unsecured. (See Definitions.) If the claim is secured, check the box for the nature and value of property that secures the claim, attach copies of lien documentation, and state, as of the date of the bankruptcy filing, the annual interest rate (and whether it is fixed or variable), and the amount past due on the claim.

5. Amount of Claim Entitled to Priority Under 11 U.S.C. § 507 (a).

If any portion of the claim falls into any category shown, check the appropriate box(es) and state the amount entitled to priority. (See Definitions.) A claim may be partly priority and partly non-priority. For example, in some of the categories, the law limits the amount entitled to priority.

6. Credits:

An authorized signature on this proof of claim serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

7. Documents:

Attach redacted copies of any documents that show the debt exists and a lien secures the debt. You must also attach copies of documents that evidence perfection of any security interest. You may also attach a summary in addition to the documents themselves. FRBP 3001(c) and (d). If the claim is based on delivering health care goods or services, limit disclosing confidential health care information. Do not send original documents, as attachments may be destroyed after scanning.

8. Date and Signature:

The individual completing this proof of claim must sign and date it. FRBP 9011. If the claim is filed electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what constitutes a signature. If you sign this form, you declare under penalty of perjury that the information provided is true and correct to the best of your knowledge, information, and reasonable belief. Your signature is also a certification that the claim meets the requirements of FRBP 9011(b). Whether the claim is filed electronically or in person, if your name is on the signature line, you are responsible for the declaration. Print the name and title, if any, of the creditor or other person authorized to file this claim. State the filer's address and telephone number if it differs from the address given on the top of the form for purposes of receiving notices. If the claim is filed by an authorized agent, attach a complete copy of any power of attorney, and provide both the name of the individual filing the claim and the name of the agent. If the authorized agent is a servicer, identify the corporate servicer as the company. Criminal penalties apply for making a false statement on a proof of claim.

1 PROOF OF SERVICE

2
3 RE: RESIDENTIAL CAPITAL, LLC, aka RESIDENTIAL CAPITAL
CORPORATION
4 CASE NO.: 12-12020

5 I declare that I am employed in the County of Orange, State of California. I am
6 over the age of eighteen years and not a party to the within action. My business
7 address is 2955 Main Street, Second Floor, Irvine, California 92614. On July 26, 2013,
8 I served a **RESPONSE BY CREDITOR THE WOLF FIRM, A LAW CORPORATION TO**
9 **DEBTOR'S NOTICE OF HEARING AND MOTION ON SIXTEENTH OMNIBUS**
10 **OBJECTION TO CLAIMS; DECLARATION OF ALAN STEVEN WOLF IN SUPPORT**
11 **THEREOF** on each of the interested parties by placing a true copy thereof in a sealed
12 envelope with postage thereon fully prepaid in the United States mail at Irvine,
13 California, addressed as follows:

14
15 SEE ATTACHED LIST MARKED AS
EXHIBIT "1" AND INCORPORATED
16 HEREIN BY REFERENCE

17 I declare under penalty of perjury that the foregoing is true and correct and that
18 this declaration was executed on July 26, 2013, at Irvine, California.


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21 
Sara G. Tena
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EXHIBIT "1"

RE: RESIDENTIAL CAPITAL, LLC, aka RESIDENTIAL CAPITAL CORPORATION
CASE NO.: 12-12020

Attention: Gary S. Lee
Norman S. Rosenbaum
Jordan A. Wishnew
MORRISON & FOERSTER LLP
1290 Avenue of the Americas
New York, New York 10104
(Counsel for Debtor – *service via electronic & U.S. mail*)

Kenneth H. Eckstein, Esq.
Douglas H. Mannal, Esq.
Kramer Levin Naftalis & Frankel LLP
1117 Avenue of the Americas
New York, NY 10036
(Attorneys for the Official Committee of Unsecured Creditors –
service via electronic & U.S. mail)

Office of the United States Trustee for the Southern District of New York,
33 Whitehall Street, 21st Floor
New York, NY 10004
Attention: Tracy Hope Davis, Linda A. Riffkin, and
Brian S. Masumoto

Office of the United States Attorney General
U.S. Department of Justice
950 Pennsylvania Avenue NW
Washington, DC 20530-0001
Attention: US Attorney General, Eric H. Holder, Jr.

Office of the New York State
Attorney General
The Capitol
Albany, NY 12224-0341
Attention: Nancy Lord, Esq.
and Enid N. Stuart, Esq.

Office of the U.S. Attorney for the
Southern District of New York,
One St. Andrews Plaza
New York, NY 10007
Attention: Joseph N. Cordaro, Esq.

Courtesy Copies:

Chambers of the Honorable Martin Glen
Courtroom 501
One Bowling Green
New York, NY 10004
(caused to be served via attorney service)